

1. PURPOSE. This order establishes the functions and responsibilities of the Aviation Medicine Program in the conduct and administration of the medical investigation of aircraft accidents.

2. DISTRIBUTION. This order is distributed to director level in Washington, except in the Office of Aviation Medicine, where it is distributed to division level; to division level in regions and centers, except in the Civil Aeromedical Institute (CAMI) where it is distributed to branch level; to medical offices in Air Route Traffic Control Centers(ARTCC); and to General Aviation, Air Carrier, and Flight Standards District Offices.

3. CANCELLATION. Order 8025.1A, Medical Investigation of Aircraft Accidents, dated November 13, 1978, is cancelled.

4. BACKGROUND. A review of the activities of the Aviation Medicine Program in aircraft accident investigation identified the need for a more coordinated prospective "projectoriented" approach to defining the contributions of (1) medical, toxicologic, and other human factors to nonfatal and fatal accidents and (2) aircraft design deficiencies to crash injuries, in order to better identify measures that should be taken toward improving aviation safety. Consequently, two approaches were decided upon for the medical investigation of aircraft accidents in the Aviation Medicine Program, both being directed by the Accident Investigation Projects Review Team. Autopsy and toxicologic information shall be acquired in fatal accidents and compiled with information in airman medical records for identification of possible contributions of medical conditions and toxic agents to accidents. Accident investigation projects shall be undertaken for both nonfatal and fatal accidents to test specific hypotheses relating human factors to accident cause, and aircraft design to crash injury and survival. Aviation Medicine Program personnel shall continue to participate in air carrier aircraft accidents and other special investigations as requested.

5. CONDUCT OF THE PROGRAM.

a. Acquisition of Autopsy, Toxicologic, and Medical Information

Communication Control Centers (CCC), upon report of fatal aircraft accidents, shall immediately notify the appropriate Flight Surgeons or

Aviation Medical Examiners (AME's) as authorized by Flight Surgeons, who shall coordinate with InvestigatorsinCharge in arranging for autopsies and obtaining toxicologic specimens. The Flight Surgeons shall provide assistance personally, or contact AME's for assistance, especially for aircraft accidents in remote locations. The Flight Surgeons shall assure that, whenever possible, toxicologic specimens are sent to the Aviation Toxicology Laboratory (AAC114) in the Aeromedical Research Branch at CAMI. They shall review autopsy and toxicologic reports, and the medical certification status of pilot fatalities, and complete the Accident Worksheets. They shall provide copies of the autopsy and toxicologic reports and the Accident Worksheets to the InvestigatorsinCharge and the Medical Statistical Section (AAC132) in the Aeromedical Certification Branch at CAMI, which shall compile, store, and analyze autopsy, toxicologic, and medical certification information on airmen involved in accidents for identification of possible contributions of medical conditions and toxic agents to accidents.

b. Acquisition of Information for Accident Investigation Projects.

The Flight Surgeons, when advised of fatal aircraft accidents by the CCC's, shall determine which fatal accidents apply to accident investigation projects. Their assistance may also be requested, especially in nonfatal aircraft accidents, by the managers of these projects. The Flight Surgeons shall coordinate with

the Investigators in Charge in obtaining information in conjunction with accident investigation projects. They may contact specially designated AME's for assistance, especially for aircraft accidents in remote locations. The Flight Surgeons shall report all information obtained in these projects to cognizant project managers who shall compile, store, analyze, and present this information for application.

6. RESPONSIBILITIES IN THE PROGRAM .

a. The Office of Aviation Medicine shall:

- (1) Develop all procedures and coordinate all functions of the Aviation Medicine Program in aircraft accident investigations.
- (2) Form the Accident Investigation Projects Review Team and convene it periodically to identify requirements in the medical investigation of aircraft accidents; plan, review, and recommend projects to be undertaken to fulfill requirements; and review the status of assigned accident investigation projects.
- (3) Manage accident investigation projects assigned to it.
- (4) Obtain information in conjunction with accident investigation projects in coordination, as appropriate, with Flight Surgeons.
- (5) Participate in air carrier accident investigations as requested or indicated.
- (6) Conduct special investigations of aircraft accidents at the request of the Federal Air Surgeon.

b. Flight Surgeons shall:

- (1) Receive notification of all fatal aircraft accidents.
- (2) Coordinate with Investigators in Charge in arranging for autopsies, obtaining toxicologic specimens, and acquiring information in conjunction with accident investigation projects.
- (3) Provide assistance personally or contact AME's for assistance in arranging for autopsies and obtaining toxicologic specimens, especially for accidents in remote locations.
- (4) Assure that, whenever toxicologic specimens must be sent to local laboratories, duplicate specimens are also obtained for analysis by the Aviation Toxicology Laboratory (AAC114) in the Aeromedical Research Branch at CAMI.
- (5) Review autopsy and toxicologic reports, and the medical certification status of pilot fatalities, complete the Accident Worksheets, and provide copies of the reports and worksheets to the Investigators in Charge and the Medical Statistical Section (AAC132) in the Aeromedical Certification Branch at CAMI.
- (6) Participate in air carrier accident investigations as requested or indicated.
- (7) Select certain AME's for training and special designation to assist in obtaining information in conjunction with accident investigation projects.
- (8) Provide assistance or contact specially designated AME's for assistance in obtaining information in

conjunction with accident investigation projects, and report all information obtained in these projects to cognizant project managers.

(9) Manage the reimbursement of AME's for these services.

(10) Provide information on investigative findings to AME participating in the investigation of aircraft accidents.

c. Civil Aeromedical Institute shall:

(1) Conduct toxicologic analyses on specimens from, and special pathologic studies on, aircraft accident fatalities.

(2) Compile, store, and analyze autopsy, toxicologic, and medical certification information of airmen involved in accidents for identification of possible contributions of medical conditions and toxic agents to accidents.

(3) Manage accident investigation projects assigned to it.

(4) Obtain information in conjunction with accident investigation projects in coordination, as appropriate, with Flight Surgeons.

(5) Participate in air carrier accident investigations as requested or indicated.

(6) Conduct special investigations of aircraft accidents at the request of the Federal Air Surgeon.

(7) Provide appropriate training for Flight Surgeons, AME's, and other accident investigators, as appropriate, in the medical investigation of aircraft accidents.

d. Aviation Medical Examiners shall:

(1) Assist Flight Surgeons in obtaining autopsies and toxicologic specimens in fatal aircraft accidents.

(2) If specially designated, receive appropriate training and assist Flight Surgeons in obtaining information in conjunction with accident investigation projects.

(3) Assist investigators in charge in accident report preparation as appropriate.

7. ACCIDENT INVESTIGATION PROJECTS REVIEW TEAM. This Team shall identify requirements in the medical investigation of aircraft accidents, particularly in general aviation, recommend and coordinate projects to be undertaken to fulfill identified requirements, and plan for the application of information gained in accident investigation projects and compiled from autopsies, toxicologic analyses, and medical certification records in educational and regulatory measures directed toward improving aviation safety.

8. SPECIALLY DESIGNATED AVIATION MEDICAL EXAMINERS. Flight Surgeons shall select certain AME's for training and special designation to assist in obtaining information in conjunction with accident investigation projects. These special designations shall be based primarily on availability of funds, anticipated need for their assistance in areas of high accident frequency and in remote areas, and their interest in aircraft accident investigation.

9. TRAINING IN ACCIDENT INVESTIGATION. In all AME Seminars, AME's shall be given training primarily on how to arrange for autopsies and to obtain toxicologic specimens. Flight Surgeons (and other agency physicians) and speciallydesignated AME's shall participate in a 1week course on the medical investigation of aircraft accidents, administered by the Aeromedical Education Branch (AAC140) at CAMI. This course will assure that attendees are adequately informed in all areas of medical investigation *of* aircraft accidents, especially areas pertinent to aircraft accident projects.

10. AVIATION MEDICAL EXAMINER REIMBURSEMENT. AME's who provide assistance in obtaining autopsies and toxicologic specimens in fatal aircraft accidents shall be reimbursed by the Regional Flight Surgeons for travel and incidental expenses, and receive \$50 per accident. Specially-designed AME's will be reimbursed by CAMI for travel and receive per diem while attending the course on the medical investigation of aircraft accidents. For assistance in acquiring information in conjunction with special accident investigation projects, which includes onsite investigation and completion of the special project accident investigation form, the speciallydesignated AME's shall be reimbursed by Regional Flight Surgeons for travel and per diem, and receive a consultant's fee for 1 day per accident. The fee to be paid will be the amount currently approved for FAA medical appointed consultants. This fee will be the total payment for professional services rendered.

11. FUNDING. Funds for these activities shall be requested by medical programs through the normal budgetary process and through annual calls for training and travel estimates.

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